

## **APPLICATION DATA SHEET**

### **Application Information**

Application number::	09/758,012
Filing Date::	01/10/01
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title ::	SPONSORSHIP MANAGEMENT SYSTEM
Attorney Docket Number::	65714-8
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Petition included?::	No
Petition Type::	
Licensed U.S. Gov't Agency::	No
Contract or Grant No::	
Secrecy Order in Parent Appl.?::	No

## First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Middle Name::	J.
Family Name::	Munson
Name Suffix::	
City of Residence::	Cupertino
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	10610 Stokes Avenue
City of mailing address::	Cupertino
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	65014

## Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Russell
Middle Name::	S.
Family Name::	Hinds
Name Suffix::	
City of Residence::	Austin
State or Province of Residence::	TX

Country of Residence::

Street of mailing address:: 12400 St. Hwy 71W #350-245

City of mailing address:: Austin

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address:: 78738

### Correspondence Information

Correspondence Customer Number:: **22504**

### Representative Information

Representative Customer Number::		<b>22504</b>
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### Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	Sponsorwise
Street of mailing address::	PO Box 18160
City of mailing address::	San Jose
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	95158-8160